

Table S. Vizient Pediatric Ready-to-Use Survey

- **Bedside manipulation of medications by nursing staff has the potential to lead to medication errors and adverse events.**
- **Preparation of patient-specific doses by pharmacy personnel decreases the incidence of medication errors secondary to incorrect dose administration.**
- **This survey is to assess current practices on pediatric ready-to-use enteral and parenteral medications.**
- **Ready-to-use medications are defined as medications that do not require any manipulation to achieve the target dose for a patient.**

1. **Name of the institution?**
2. **What type of institution are you replying from? Check all that apply.**
 - ☐ Stand-alone Pediatric Hospital
 - ☐ Pediatric/Neonatal ICU/Wards within an Adult Hospital
 - ☐ Teaching Hospital
 - ☐ Pediatric Trauma Center
3. **How many total beds are in your facility?**
4. **How many pediatric beds are in your institution (include NICU, but not nursery)?**
5. **Do you have dedicated pediatric pharmacy services? (See definition.)**
(Dedicated Pediatric Pharmacy Services is defined as the area's sole purpose is the care of pediatric patients)
 - ☐ No
 - ☐ Yes, a fully operational dispensing pharmacy including IV prep
 - ☐ 24 hr/7 days a week ☐ Day/Evening Shift but Not Overnight ☐ Day Shift Only
 - ☐ Yes, a dispensing pharmacy without IV prep
 - ☐ 24 hr/7 days a week ☐ Day/Evening Shift but Not Overnight ☐ Day Shift Only
 - ☐ Yes, a satellite with work stations for order processing but without dispensing capabilities
 - ☐ 24 hr/7 days a week ☐ Day/Evening Shift but Not Overnight ☐ Day Shift Only
6. **Have you had medication errors occur secondary to errors in manipulation of a product that could have been prevented by using a "ready-to-use" product?**
7. **Are enteral doses dispensed as patient specific, or do nurses manipulate product at bedside to achieve desired dose?**
 - ☐ Patient specific
 - ☐ Bedside manipulation
 - ☐ Combination of both patient specific + allow bedside manipulation
8. **What is an estimated percentage of enteral doses dispensed that require bedside manipulation at your institution?**
9. **Is there an age or weight limit that drives the decision to dispense as patient specific or to allow bedside manipulation of enteral products?**
 - ☐ Yes, weight = _____, age = _____
 - ☐ No
10. **If nurses manipulate an enteral product at bedside is this for controlled or non-controlled medications? (Check all that apply.)**
 - ☐ Schedule II
 - ☐ Schedule III
 - ☐ Schedule IV
 - ☐ Schedule V
 - ☐ Schedule VI
11. **Does this process differ for scheduled or non-scheduled (PRN) medication orders?**
 - ☐ Yes, explain:
 - ☐ No
12. **Are parenteral doses dispensed as patient specific, or do nurses manipulate product at bedside to achieve desired dose?**
 - ☐ Patient specific
 - ☐ Bedside manipulation
 - ☐ Combination of both patient specific + allow bedside manipulation

13. What is an estimated percentage of *parenteral* doses dispensed that require bedside manipulation at your institution?
14. Is there an age or weight limit that drives the decision to dispense as patient specific or to allow bedside manipulation of *parenteral* products?
☐ Yes, weight = _____, age = _____
☐ No
15. If nurses manipulate a *parenteral* product at bedside is this for controlled or non-controlled medications? (Check all that apply.)
☐ Schedule II
☐ Schedule III
☐ Schedule IV
☐ Schedule V
☐ Schedule VI
16. Does this process differ for scheduled or non-scheduled (PRN) medication orders?
☐ Yes, explain:
☐ No
17. Does your institution receive non-controlled medications in ready-to-use packages?
☐ Yes, >50% of products
☐ Yes, 25%–50% of products
☐ Yes, <25% of products
☐ No
18. If yes, which non-controlled medications? (Please list.)
19. If no, are medications repackaged into standardized unit doses by institutional personnel?
☐ All
☐ Some, estimated number of products
☐ None
20. If no, are all medication doses dispensed as patient-specific doses?
☐ All
☐ Some, what percentage?
☐ None
21. Does your institution receive controlled medications in ready-to-use packages?
☐ Yes, >50% of products
☐ Yes, 25%–50% of products
☐ Yes, <25% of products
☐ No
22. If yes, which controlled medications? (Please list.)
23. If no, are controlled medications repackaged into standardized unit doses by institutional personnel?
☐ All
☐ Some, estimated number of products
☐ None
24. If no, are all medication doses dispensed as patient-specific doses?
☐ All
☐ Some, what percentage?
☐ None
25. What external companies do you use for repackaging of medications into ready-to-use products? (e.g., Pharmedium)
26. What, if any, additional technology has been justified within your institution secondary to providing ready-to-use products?
27. Additional comments